## FORM D

SEC Wail Mail Processing Section

MAY 122008

Washington, DC 106

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### **FORM D**

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

ОМВ	APP	ROVAL	

OMB Number: 3235-0076

Expires: April 30, 2008 Estimated average burden hours per response........... 16.00

SEC USE ONLY								
Prefix		Serial						
DA	TE RECEIV	ΈD						

Name of Offering ( Common Stoo		mendment and nar	ne has changed	, and indicate chan	ge.)					_
Filing Under (Check bo	ox(es) that apply):	□ R	ule 504	Rule 505	Rule	506	☐ Sec	tion 4(6)	ULOE	
Type of Filing:	New Filing	☐ Amendment								
		A	. BASIC II	DENTIFICAT	ION DATA			,		
	tion requested abou									
Name of Issuer ( Country Hole	☐ check if this is a ding Corp.	n amendment and	name has chang	ged, and indicate cl	nange.)					
Address of Execu 2300 Lohman	tive Offices 's Spur, Suite 1	`		et, City, State, Zip	Code)		•	e Number (1 61-0035	ncluding Area Code)	
	pal Business Opera Executive Offices)		lumber and Stre	et, City, State, Zip	Code)		Telephon	e Numb <del>er</del> (li	PROCESS	ED
Brief Description Bank holding								ŀ	MAY 19200	
Type of Business  ☐ corporation ☐ business tn				rship, already form rship, to be formed			oth oth	er (please sp	THOMSON RE	UTE
	ed Date of Incorpor	_		ــــــــــــــــــــــــــــــــــــــ	6	Year 0	3	Actual	☐ Estimated	
Jurisdiction of Inc	corporation or Orga			stal Service abbrev N for other foreigr		3;		(T)	4	

#### GENERAL INSTRUCTIONS

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### States

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid **OMB** control number.

SEC 1972 (6-02)



08048838

		A. BASIC IDENTIFI	CATION DATA					
<ul> <li>Enter the information requested for the following:</li> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or  Managing Partner			
Full Name (Last name first, if ind	lividual)							
Clayton, Danny B	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·						
Business or Residence Address (I	•	•						
2300 Lohman's Spur,								
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner			
Full Name (Last name first, if ind	lividual)							
Belote Family Partner	ship, LTD			· · · · ·				
Business or Residence Address (I	Number and Street, City,	State, Zip Code)						
2300 Lohman's Spur,	Suite 180, Lakeway	, Texas 78734		· · · · · · · · · · · · · · · · · · ·				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or  Managing Partner			
Full Name (Last name first, if ind	lividual)							
Belote, Ferrald Jr.								
Business or Residence Address (I	Number and Street, City,	State, Zip Code)						
2300 Lohman's Spur,	Suite 180, Lakeway	, Texas 78734						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or  Managing Partner			
Full Name (Last name first, if inc	lividual)	<u></u>						
Clayton, Guy C.								
Business or Residence Address (I	Number and Street, City,	State, Zip Code)						
2300 Lohman's Spur,	Suite 180, Lakeway	, Texas 78734						
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner		☐ Director	☐ General and/or  Managing Partner			
Full Name (Last name first, if inc	lividual)							
Gordon, Dianna								
Business or Residence Address (I	Number and Street, City,	State, Zip Code)		-				
2300 Lohman's Spur,	Suite 180, Lakeway	, Texas 78734						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☑ Director	General and/or Managing Partner			
Full Name (Last name first, if inc	lividual)							
Hopkins, Ronald	V 1 15 15 15	Company Control		·				
Business or Residence Address (1								
2300 Lohman's Spur,	<del></del>	· _	Π <sub>Γ</sub> : 0.55	M n				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner			
Full Name (Last name first, if inc	lividual)							
McDowell, Duke								
	Business or Residence Address (Number and Street, City, State, Zip Code)							
2300 Lohman's Spur,	Suite 180, Lakeway	7, Texas 78734						

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

		A. BASIC IDENTIFI	CATION DATA					
<ul> <li>Enter the information requested for the following:</li> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	□ Director	☐ General and/or  Managing Partner			
Full Name (Last name first, if in Robert Weichsel	dividual)							
Business or Residence Address (	Number and Street, City	, State, Zip Code)						
2300 Lohman's Spur,	Suite 180, Lakeway	y, Texas 78734						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or  Managing Partner			
Full Name (Last name first, if inc	dividual)							
Business or Residence Address (	Number and Street, City	, State, Zip Code)						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or  Managing Partner			
Full Name (Last name first, if inc	dividual)			-				
Business or Residence Address (	Number and Street, City	, State, Zip Code)						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if inc	lividual)							
Business or Residence Address (	Number and Street, City,	State, Zip Code)			····			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner			
Full Name (Last name first, if inc	lividual)							
Business or Residence Address (	Number and Street, City,	State, Zip Code)						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if inc	fividual)	<del></del>						
Business or Residence Address (	Number and Street, City,	State, Zip Code)						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)								
Business or Residence Address (i	Number and Street, City,	State, Zip Code)						

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B. INFORMATION ABOUT OFFERING								
		Yes	No					
i.		$\boxtimes$						
	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?							
2.	\$50,	,000						
		Yes	No					
3.	Does the offering permit joint ownership of a single unit?		$\bowtie$					
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.							
Full	Name (Last name first, if individual)							
	N/A							
Bus	siness or Residence Address (Number and Street, City, State, Zip Code)							
Nan	ne of Associated Broker or Dealer							
	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers							
(Ch	eck "All States" or check individual States)	. 🔲 All 9	States					
	☐ AL ☐ AK ☐ AZ ☐ AR ☐ CA ☐ CO ☐ CT ☐ DE ☐ DC ☐ FL ☐ GA ☐ HI	= -						
	☐ IL ☐ IN ☐ IA ☐ KS ☐ KY ☐ LA ☐ ME ☐ MD ☐ MA ☐ MI ☐ MN ☐ MI							
	MT NE NV NH NI NM NY NC ND OH OK OH	R 🔲 PA						
	RI SC SD TN TX UT VT VA WA WA WV WI W	Y 🔲 PR						
Full	Name (Last name first, if individual)							
Bus	iness or Residence Address (Number and Street, City, State, Zip Code)							
Non	ne of Associated Broker or Dealer							
Nan	ne of Associated broker of Dealer							
	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers		<b>-</b> .					
(Ch	eck "All States" or check individual States)	=	States					
	□ AL □ AK □ AZ □ AR □ CA □ CO □ CT □ DE □ DC □ FL □ GA □ HI	=						
	☐IL ☐IN ☐IA ☐KS ☐KY ☐LA ☐ME ☐MD ☐MA ☐MI ☐MN ☐MS	s ∐ MO						
	☐ MT ☐ NE ☐ NV ☐ NH ☐ NJ ☐ NM ☐ NY ☐ NC ☐ ND ☐ OH ☐ OK ☐ OH	R □ PA						
	RI SC SD TN TX TUT VT VA WA WA WV WI W	Y 🗌 PR						
Full	Name (Last name first, if individual)							
Busi	iness or Residence Address (Number and Street, City, State, Zip Code)							
Nan	ne of Associated Broker or Dealer							
~								
	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers	[T] A11 C	States					
(CIR	(Check "All States" or check individual States)							
		=						
		R ∐PA Y ∏PR						

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

_	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENS	SES A	ND USE O	F PRO	CEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security ·		Aggregate Offering Pri			Amount Already Sold
	Debt	\$	0		\$	0
	Equity	s <sup>-</sup>	10,000,00	)()	<b>\$</b>	0
	☐ Common ☐ Preferred	_	· · · · ·			
	Convertible Securities (including warrants)	\$	0		\$	0
	Partnership Interests	s <sup>-</sup>	0		s <sup></sup>	0
	Other (Specify)	<u>s</u>	0		<b>\$</b>	0
	Total	<u>s</u>	10,000,00	)0	<u>s</u>	0
	Answer also in Appendix, Column 3, if filing under ULOE.	-	- 0,000,0		<b>-</b>	· · · · · · · · · · · · · · · · · · ·
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					Aggregate
			Number o Investors			Dollar Amount of Purchases
	Accredited Investors	_	0		\$	0
	Non-accredited Investors	_	0		\$	0
	Total (for filings under Rule 504 only)				\$	
	Answer also in Appendix, Column 4, if filing under ULOE.	-	,			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question I.					
	Type of offering		Type of Security			Dollar Amount Sold
	Rule 505	_			\$	
	Regulation A	_			\$	
	Rule 504				\$	
	Total	_			\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees				\$	
	Printing and Engraving Costs				\$	
	Legal Fees			$\boxtimes$	<u> </u>	25,000
	Accounting Fees				\$	
	Engineering Fees				<u> </u>	
	Sales Commissions (specify finders' fees separately)				\$ <u></u>	
	Other Expenses (identify)				\$ \$	
	Total			⊠	· · ·	25,000
	T VIII	•••••		K.M	<b>s</b>	25,000

C. OFFERING PRICE, I	NUMBER OF INVESTORS, EXPE	NS	ES AND USE OF PRO	CE	EEDS	
b. Enter the difference between the aggregate Question I and total expenses furnished in resp the "adjusted gross proceeds to the issuer."	onse to Part C - Question 4.a. This difference is	\$			<b>\$</b>	9,975,000
<ol> <li>Indicate below the amount of the adjusted gross used for each of the purposes shown. If the amount estimate and check the box to the left of the estimate the adjusted gross proceeds to the issuer set forth in</li> </ol>	ount for any purpose is not known, furnish an ate. The total of the payments listed must equal	1				
•			Payments to Officers, Directors, & Affiliates			Payments To Others
			*	$\Box$	\$	
					<b>\$</b>	
	f machinery and equipment		<del></del>		<b>\$</b>	
Construction or leasing of plant buildings an	d facilities	. 🗆	\$		\$	
that may be used in exchange for the asse	te value of securities involved in this offering ts or securities of another issuer pursuant to a	п	\$	$\boxtimes$	\$	8,400,000
• ·			\$	ī	s—	*,,
• •			s	$\boxtimes$	s—	1,375,000
- ·			s	ī	<u>s</u> —	
	***************************************		s	$\Box$	<u>s</u> —	9,975,000
				9,97	5,000	
	D. FEDERAL SIGNATURE	£				
The issuer has duly caused this notice to be signed by the undertaking by the issuer to furnish to the U.S. Securitie accredited investor pursuant to paragraph (b)(2) of Rule	s and Exchange Commission, upon written requ	otice u <b>e</b> st	is filed under Rule 505, the of its staff, the information f	follo urnis	wing si hed by	gnature constitutes an the issuer to any non-
Issuer (Print or Type)	Signature /		Date			
Country Holding Corp.	Title of Signer (Printor Type)		May 8, 2008			
Name of Signer (Print or Type)	Title of Signer (Print or Type)					
Danny B. Clayton	President					
		_	<del></del>			

## **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

**END**